MAY 0 8 2006



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ro: Examiner: Tan V. MAI	Shawn W. O'Dowd DATE: May 8, 2006 TOTAL NO. OF PAGES INCLUDING COVER: 19 SENDER'S REFERENCE NUMBER: Intel 2207/11269			
COMPANY: USPTO				
FAX NUMBER: (571) 273-8300				
PHONE NUMBER:				
Application No.: 10/020,447	YOUR REFERENCE NUMBER: Group Art Unit: 2193			
URGENT FOR REVIEW	☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ CONFIRMATION			
ORIGI	NAL WILL FOLLOW ORIGINAL WILL NOT FOLLOW			

Notes/Comments: AMENDMENT AND REQUEST FOR RCE

- 1. Fax Cover Sheet (1)
- 2. RCE Transmittal (and one copy) (2)
- 3. RCE Fee Transmittal (and one copy) (2)
- 4. Petition for 3-month Extension of Time (1)
- 5. Amendment and Request for RCE (13)

Total: (19) pages

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Dated: May 8, 2006

Barbara Vance

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Under the Paperwork Reduction Act of 1995, 110 persons					As			
CEETDANGMITTAL		Complete if Known						
FEE TRANSMITTAL		Application Number			10/020,447			
for FY 2005		Filing Date De			ember 18, 2001			
10111 2000		First Named Inventor			Thomas D. FLETCHER			
Effective 10/01/2004. Patent fees are subject to annual revision.					V. MAI			
		Art Unit 2193						
Applicant claims small entity status. See 37 CFR 1.27		1-401-25			2207/11269			
TOTAL AMOUNT OF PAYMENT (\$) 1,810.00		ey Docke	t No.	Intel 220/11/203				
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None		3. ADDITIONAL FEES						
Order		Large Entity Small Entity						
Deposit Account: Deposit	Fee	Fee	Fee	Fee	Fee Description Fee Paid			
Account 11-0600	Code	(\$)	Code 2051	(\$) 65	Surcharge - late filling fee or eath			
Number	1051	130 50	2051	25	Surcharge - late provisional filing fee or cover			
Deposit 0.16	1052	~	2002		sheet.			
Account Name Kenyon & Kenyon LLP	1052	130	1053		Non-English specification			
The Director is authorized to: (check all that epply)	1812 1804	2,520	1812		For filing a request for ex parte reexamination			
☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge any additional fee(s) or any undergayment of fee(s)		920*	1804		Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action			
	1251	120	2251	60	Extension for reply within first month			
FEE CALCULATION	1252	450	2252	225	Extension for reply within second month Extension for reply within third month 1.020			
1. BASIC FILING FEE	1253	1,020	2253	510	- Contract of the contract of			
Lerge Entity Small Entity Fee Fee Fee Fee Description	1254	1,590	2254	795	Extension for reply within fourth month Extension for reply within fifth month			
Fee Fee Fee Fee Description Code (\$) Code (\$)	1255	2,160	2255	1,080 250	Notice of Appeal			
1001 790 2001 395 Utility filing fee	1401	500 500	2401	250	Fixing 8 trief in support of an appeal			
1002 350 2002 175 Design filing fee	1403	1,000	2403	500	Request for oral hearing			
1003 550 2003 275 Plant filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding			
1005 180 2005 80 Provisional filling fee	1452	500	2452	250	Petition to revive – unavoldable			
SUBTOTAL (1) (1)	1453	1,500	2453	750	Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,400	2501	685	Utility issue fee (or reissue)			
Z. EXTRA CLAIM PERS FOR OTHER FROM	1502	490	2502	245	Design tasue fec			
Extra Claims below Fee Paid	1503	660	2503	330 130	Pitant issue fee Petitions to the Commissioner			
Total Claims 26 -20 - = 0 X 50.00	1460	130 50	1450	50	Processing fee under 37 CFR 1.17 (q)			
Independent 4 -3 ** = 0 X 200.00 =	1806	180	1806	180	Submission of Information Disclosure Strnt			
Multiple x =	8021	40	8021	40	Recording each patent assignment per property (times number of properties)			
Depondent Large Entity Small Entity	1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.128(8))			
For Fee (\$) For Fee Per Description	1810	790	2810	395	For each additional invention to be			
1202 50 2202 25 Claims in excess of 20					examined (37 CFR § 1.129(b))			
1201 200 2201 100 Independent claims in excess of 3 1203 350 2203 180 Multiple dependent claim, if not paid	1801	790	2801	395	Request for Continued Examination (RCE) 790			
** Reissue Independent claims over	1802	900	1803		Request for expedited examination			
Paissue dains in excess of 20 and	1	500	1 ""		of a design application			
1205 90 2205 25 over original patent		Other fee (specify)						
\$UBTOTAL (2) (\$) 0		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (5) 1,810.00						
or number previously paid, if greater, For Relssues, see above					3351317-[a] (3) 1,310.00			
SUBMITTED BY					Complete (# applicable)			
	Registration No. (Automorphysical)							
Signature # Do					Date May 8, 2006			

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